Complete Summary

TITLE

Chronic kidney disease (CKD): percentage of patients aged 18 years and older with the diagnosis of advanced CKD (stage 4 or 5, not receiving RRT), who received the influenza immunization during the flu season (September through February).

SOURCE(S)

Renal Physicians Association, Physician Consortium for Performance Improvement®. Chronic kidney disease physician performance measurement set. Chicago (IL): American Medical Association; 2007 Oct. 32 p. [13 references]

Measure Domain

PRIMARY MEASURE DOMAIN

Process

The validity of measures depends on how they are built. By examining the key building blocks of a measure, you can assess its validity for your purpose. For more information, visit the Measure Validity page.

SECONDARY MEASURE DOMAIN

Does not apply to this measure

Brief Abstract

DESCRIPTION

This measure is used to assess the percentage of patients aged 18 years and older with the diagnosis of advanced chronic kidney disease (CKD) (stage 4 or 5, not receiving renal replacement therapy [RRT]), who received the influenza immunization during the flu season (September through February).

RATIONALE

The United States Renal Data System (USRDS) shows that Medicare patients with chronic kidney disease (CKD) are more likely to receive a flu vaccine versus employer group health plan patients with CKD (0.43 versus 0.08 respectively). Additionally, it is estimated that fewer than 20% of all patients in high risk groups receive a flu vaccine each year. Patients with CKD need to be vaccinated yearly in

order to decrease morbidity and mortality related to influenza and its complications.*

*The following clinical recommendation statements are quoted <u>verbatim</u> from the referenced clinical guidelines and represent the evidence base for the measure:

Vaccination with TIV (trivalent inactivated flu vaccine) is recommended for the following persons who are at increased risk for severe complications from influenza, or at higher risk for influenza-associated clinic, emergency department, or hospital visits: adults and children who have chronic pulmonary (including asthma), cardiovascular (except hypertension), renal, hepatic, hematological, or metabolic disorders (including diabetes mellitus). (Centers for Disease Control and Prevention [CDC], 2007)

In any given year, the optimal time to vaccinate patients cannot be determined because influenza seasons vary in their timing, and more than one outbreak might occur in a single community in a single year. (CDC, 2007)

In general, health-care providers should begin offering vaccination soon after vaccine becomes available and if possible, by October. (CDC, 2007)

Vaccine efforts should continue throughout the season, because the duration of the influenza season varies, and influenza might not occur in certain communities until February or March. The majority of adults have antibody protection against influenza within 2 weeks after vaccination. (CDC, 2007)

PRIMARY CLINICAL COMPONENT

Chronic kidney disease (CKD); influenza immunization

DENOMINATOR DESCRIPTION

All patients aged 18 years and older with the diagnosis of advanced chronic kidney disease (CKD) (stage 4 or 5, not receiving renal replacement therapy [RRT]) (see the related "Denominator Inclusions/Exclusions" field in the Complete Summary)

NUMERATOR DESCRIPTION

Patients who received the influenza immunization during the flu season (September through February)

Evidence Supporting the Measure

EVIDENCE SUPPORTING THE CRITERION OF QUALITY

 A clinical practice guideline or other peer-reviewed synthesis of the clinical evidence

Evidence Supporting Need for the Measure

NEED FOR THE MEASURE

Overall poor quality for the performance measured Use of this measure to improve performance

EVIDENCE SUPPORTING NEED FOR THE MEASURE

U.S. Renal Data System. USRDS 2006 annual data report: atlas of end-stage renal disease in the United States. Bethesda (MD): National Institutes of Health, National Institute of Diabetes and Digestive and Kidney Diseases; 2006.

State of Use of the Measure

STATE OF USE

Current routine use

CURRENT USE

Internal quality improvement

Application of Measure in its Current Use

CARE SETTING

Ambulatory Care Physician Group Practices/Clinics

PROFESSIONALS RESPONSIBLE FOR HEALTH CARE

Physicians

LOWEST LEVEL OF HEALTH CARE DELIVERY ADDRESSED

Individual Clinicians

TARGET POPULATION AGE

Age greater than or equal to 18 years

TARGET POPULATION GENDER

Either male or female

STRATIFICATION BY VULNERABLE POPULATIONS

Unspecified

Characteristics of the Primary Clinical Component

INCIDENCE/PREVALENCE

See the "Rationale" field.

ASSOCIATION WITH VULNERABLE POPULATIONS

Unspecified

BURDEN OF ILLNESS

Unspecified

UTILIZATION

Unspecified

COSTS

Unspecified

Institute of Medicine National Healthcare Quality Report Categories

IOM CARE NEED

Living with Illness Staying Healthy

IOM DOMAIN

Effectiveness

Data Collection for the Measure

CASE FINDING

Users of care only

DESCRIPTION OF CASE FINDING

All patients aged 18 years and older with the diagnosis of advanced chronic kidney disease (CKD) (stage 4 or 5, not receiving renal replacement therapy [RRT])

DENOMINATOR SAMPLING FRAME

Patients associated with provider

DENOMINATOR INCLUSIONS/EXCLUSIONS

Inclusions

All patients aged 18 years and older with the diagnosis of advanced chronic kidney disease (CKD) (stage 4 or 5, not receiving renal replacement therapy [RRT])

Exclusions

- Documentation of medical reason(s) for patient not receiving the influenza immunization
- Documentation of patient reason(s) for patient not receiving the influenza immunization
- Documentation of system reason(s) for patient not receiving the influenza immunization

RELATIONSHIP OF DENOMINATOR TO NUMERATOR

All cases in the denominator are equally eligible to appear in the numerator

DENOMINATOR (INDEX) EVENT

Clinical Condition Encounter

DENOMINATOR TIME WINDOW

Time window is a single point in time

NUMERATOR INCLUSIONS/EXCLUSIONS

Inclusions

Patients who received the influenza immunization during the flu season (September through February)

Exclusions

None

MEASURE RESULTS UNDER CONTROL OF HEALTH CARE PROFESSIONALS, ORGANIZATIONS AND/OR POLICYMAKERS

The measure results are somewhat or substantially under the control of the health care professionals, organizations and/or policymakers to whom the measure applies.

NUMERATOR TIME WINDOW

Fixed time period

DATA SOURCE

Administrative data Medical record

LEVEL OF DETERMINATION OF QUALITY

Individual Case

PRE-EXISTING INSTRUMENT USED

Unspecified

Computation of the Measure

SCORING

Rate

INTERPRETATION OF SCORE

Better quality is associated with a higher score

ALLOWANCE FOR PATIENT FACTORS

Unspecified

STANDARD OF COMPARISON

Internal time comparison

Evaluation of Measure Properties

EXTENT OF MEASURE TESTING

Unspecified

Identifying Information

ORIGINAL TITLE

Measure #5: influenza immunization.

MEASURE COLLECTION

The Physician Consortium for Performance Improvement® Measurement Sets

MEASURE SET NAME

<u>Chronic Kidney Disease Physician Performance Measurement Set</u>

SUBMITTER

American Medical Association on behalf of the Renal Physicians Association and the Physician Consortium for Performance Improvement®

DEVELOPER

Physician Consortium for Performance Improvement® Renal Physicians Association

FUNDING SOURCE(S)

Unspecified

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FINANCIAL DISCLOSURES/OTHER POTENTIAL CONFLICTS OF INTEREST

Conflicts, if any, are disclosed in accordance with the Physician Consortium for Performance Improvement® conflict of interest policy.

INCLUDED IN

Ambulatory Care Quality Alliance

ADAPTATION

Measure was not adapted from another source.

RELEASE DATE

MEASURE STATUS

This is the current release of the measure.

SOURCE(S)

Renal Physicians Association, Physician Consortium for Performance Improvement®. Chronic kidney disease physician performance measurement set. Chicago (IL): American Medical Association; 2007 Oct. 32 p. [13 references]

MEASURE AVAILABILITY

The individual measure, "Measure #5: Influenza Immunization," is published in the "Chronic Kidney Disease Physician Performance Measurement Set." This document and technical specifications are available in Portable Document Format (PDF) from the American Medical Association (AMA)-convened Physician Consortium for Performance Improvement® Web site: www.physicianconsortium.org.

For further information, please contact AMA staff by e-mail at cgi@ama-assn.org.

NQMC STATUS

This NQMC summary was completed by ECRI Institute on March 27, 2008. The information was verified by the measure developer on June 11, 2008.

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